This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

| STATEMENT OF A | CCOUNT | FOR COPYRIG | HT OFFICE USE ONLY | Return completed workbook by email to: |
|---------------------------------------------------------------|-------------------|-------------------------|--------------------------------------------------|------------------------------------------------------------------------------------|
| for Secondary Transmis Cable Systems (Short F | | DATE RECEIVED | AMOUNT \$ | For additional information, |
| General instructions are loca in the first tab of this workbo | | 8/27/2020 | ALLOCATION NUMBER | contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150 |
| A ACCOUNTIN | IG PERIOD COVEREI | D BY THIS STATEMENT: (Y | YYY/(Period)) Period 2 = July 1 - December 31 | |

| Accounting Period | | 20192 Barcode Data Filing Period (optional - see instructions) |
|----------------------|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Period | | |
| В | | Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. |
| Owner | | List any other name or names under which the owner conducts the business of the cable system. |
| | | If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. |
| | | Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. |
| | | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM |
| | | Western Broadband LLC |
| | | BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT) |
| | | MAILING ADDRESS OF OWNER OF CABLE SYSTEM |
| | | 9666 E Riggs Road Ste 108 |
| | | (Number, street, rural route, apartment, or suite number) |
| | | Sun Lakes, AZ 85248-7410 (City, town, state, zip) |
| С | | RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. |
| System | 1 | IDENTIFICATION OF CABLE SYSTEM: |
| | | MAILING ADDRESS OF CABLE SYSTEM: |
| | 2 | (Number, street, rural route, apartment, or suite number) |
| | | (City, town, state, zip code) |

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name | Western Broadband LLC | 62738 |
| D | Instructions: List each separate community served by the cable system. A "co "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community the as the "first community." Please use it as the first community on all future fil | ommunity" is the same as a "community unit" as defined in FCC rules: rated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter known lings. |
| Area Served | Note: Entities and properties such as hotels, apartments, condominiums, or i identified city. | mobile home parks should be reported in parentheses below the |
| | CITY OR TOWN | STATE |
| First | Robson Ranch | AZ |
| Community | | |
| | | |
| dd Rows as Necessary | | |
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| | LEGAL NAME OF OWNER OF C | | | | | | | FORM SA1- | DE. PAGE |
|---------------|--------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------|------------------------------------------------|----------|------------------|--------------|-----------------------|---------------------|
| Name | Western Broadband LL | | : | | | | | 515 | 627 |
| | | • | | | | | | | |
| Е | SECONDARY TRANSMISSION | | | | | | | | |
| E | In General: The information in s | • | | - | | • | | | |
| Secondary | system, that is, the retransmission about other services (including particulation) | | | | | | | | |
| Transmission | last day of the accounting period | <i>,</i> , , | , | | , | | | | |
| Service: Sub- | Number of Subscribers: Both | · | | | | , | able system | n, broken | |
| scribers and | down by categories of secondar | | | 0 | | • | | | |
| Rates | each category by counting the n separately for the particular serv | | • | 0,0 | | • | • | s charged | |
| | Rate: Give the standard rate of | | | | | | | ge and the | |
| | unit in which it is generally billed | - | - | • | | | | - | |
| | category, but do not include disc | | | | | | | | |
| | Block 1: In the left-hand block | | | - | | | | | |
| | systems most commonly provide that applies to your system. Not | | | | | | | | |
| | categories, that person or entity | | | Ũ | | 0 | | | |
| | subscriber who pays extra for ca | | | | | 0. | , , | | |
| | first set" and would be counted of | once again und | der "Servi | ce to additional s | set(s)." | | | | |
| | Block 2: If your cable system | - | | • | | | | | |
| | printed in block 1 (for example, t | | | | | • | ,. | | |
| | with the number of subscribers a sufficient. | and rates, in th | e ngnt-na | nd block. A two- | or thre | e-word descrip | tion of the | service is | |
| | | DCK 1 | | | | | BLOCK | < 2 | |
| | CATEGORY OF SERVICE | NO. OF SUBSCRIB | | RATE | CATE | EGORY OF SE | RVICE | NO. OF SUBSCRIBERS | RAT |
| | Residential: | 000001110 | 2110 | | 0,111 | | | CODUCTION | |
| | Service to first set | | 213 | 36.55 | | | | | |
| | Service to additional set(s) | | | | | | | | |
| | • FM radio (if separate rate) | | | | | | | | |
| | Motel, hotel | | | | | | | | |
| | Commercial | | | | | | | | |
| | Converter | | | | | | | | |
| | Residential | | | | | | | | |
| | Non-residential | | | | | | | | |
| | | | | | | | | | |
| | SERVICES OTHER THAN SEC | ONDARY TRA | ANSMISS | IONS: RATES | | | | | |
| F | In General: Space F calls for ra | te (not subscri | ber) infori | mation with respe | ect to a | ll your cable sy | stem's serv | vices that were | |
| Г | not covered in space E, that is, t | | | | | | | | |
| Services | service for a single fee. There ar furnished at cost or (2) services | | | | | | | | |
| Other Than | amount of the charge and the ur | | | | | | | | |
| Secondary | enter only the letters "PP" in the | rate column. | | | | - | | 5 , | |
| ransmissions: | Block 1: Give the standard rat | | | | | | | | |
| Rates | Block 2: List any services that listed in block 1 and for which a | | | | 0 | 0 | • | | |
| | brief (two- or three-word) descrip | | 5 | | ea. List | these other se | rvices in th | e form of a | |
| | | | | | | | | | |
| | | BLO | | | | DATE | 0.175.0/ | BLOCK 2 | D 4 T |
| | CATEGORY OF SERVICE Continuing Services: | RATE | | DRY OF SERVIC | | RATE | CATEGO | ORY OF SERVICE | RAT |
| | Pay cable | 18.95 | | l, hotel | | | | | |
| | • Pay cable—add'l channel | 10.93 | | mercial | | | | | |
| | • Fire protection | | • Pay | | | | | | |
| | | | | cable-add'l chanr | nel | | | | |
| | •Burglar protection | | - ay | Janio-auu i Gridili | | | | | |
| | •Burglar protection | | • Fire | protection | | | | | |
| | Installation: Residential | 20.05 | | protection | | | | | |
| | Installation: Residential • First set | 29.95 | • Burg | lar protection | | | | | |
| | Installation: Residential • First set • Additional set(s) | 29.95 | • Burg Other se | lar protection ervices: | | | | | |
| | Installation: Residential • First set • Additional set(s) • FM radio (if separate rate) | 29.95 | • Burg Other se • Reco | lar protection ervices: onnect | | | | | |
| | Installation: Residential • First set • Additional set(s) | 29.95 | • Burg Other se • Reco • Disco | lar protection ervices: onnect onnect | | | | | |
| | Installation: Residential • First set • Additional set(s) • FM radio (if separate rate) | 29.95 | • Burg Other se • Reco • Disco • Outle | lar protection ervices: onnect | | | | | |

| | | | | 0/0751 |
|------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name | LEGAL NAME OF OWNER OF | | | SYSTEM |
| | Western Broadband L | | | 627 |
| | PRIMARY TRANSMITTERS: | | | |
| G | | ntify every television station (including n during the accounting period, <i>excep</i> | | |
| - | FCC rules and regulations i | n effect on June 24, 1981, permitting th | he carriage of certain network progr | rams [sections |
| Primary ansmitters: | | e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. | 61(e)(2) and (4))]; and (2) certain sta | ations carried on a |
| elevision | | : With respect to any distant stations c | arried by your cable system on a su | ıbstitute program |
| | | lles, regulations, or authorizations: e in space G—but do list it in space I (t | he Special Statement and Program | log) if the |
| | station was carried only on | | ne opecial otatement and i rogram | |
| | | also in space I, if the station was carrie on concerning substitute basis stations, | | |
| | | n's call sign. <i>Do not</i> report origination p | | |
| | multicast stream associated "WETA-2" as the same on t | with a station according to its over-the | e-air designation. For example, rep | oort multistream |
| | | el number the FCC assigned to the tele | evision station for broadcasting over | r the air in its community |
| | | RC is channel 4 in Washington, D.C. case whether the station is a network | station an independent station or | a poncommercial |
| | | ring the letter "N" (for network), "N-M" | • | |
| | · · · // | "E" (for noncommercial educational), o | i i | tional multicast). |
| | | rms, see page (iv) of the general instrunt n of each station. For U.S. stations, list | | n is licensed by the |
| | FCC. For Mexican or Canad | dian stations, if any, give the name of t | he community with which the station | n is identified. |
| | | | | |
| | 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. LOCATION OF STATION |
| | ктук | 3 | I | Phoenix, AZ |
| | КРНО | 5 | Ν | Phoenix, AZ |
| | | 21 | 1 | |
| lows as Necessary | KPAZ | - ۲ - ۲ | ••••••••••••••••••••••••••••••••••••••• | Phoenix, AZ |
| ows as Necessary | KAET | 8 | E | Phoenix, AZ Phoenix, AZ |
| ows as Necessary | | | E N | |
| lows as Necessary | KAET | 8 | | Phoenix, AZ |
| iows as Necessary | KAET KUTP KSAZ | 8 45 | N | Phoenix, AZ Phoenix, AZ Phoenix, AZ |
| iows as Necessary | KAET KUTP KSAZ KASW | 8 45 10 61 | N N I | Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ |
| iows as Necessary | KAET KUTP KSAZ KASW KPNX | 8 45 10 61 12 | N N I N | Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ |
| iows as Necessary | KAET KUTP KSAZ KASW KPNX KAZT | 8 45 10 61 12 7.1 | N N I | Phoenix, AZ |
| iows as Necessary | KAET KUTP KSAZ KASW KPNX KAZT KPPX | 8 45 10 61 12 7.1 51 | N N 1 N I-M I | Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ |
| iows as Necessary | KAET KUTP KSAZ KASW KPNX KAZT KPPX KNXV | 8 45 10 61 12 7.1 | N N I N | Phoenix, AZ Phoenix, AZ |
| iows as Necessary | KAET KUTP KSAZ KASW KPNX KAZT KPPX | 8 45 10 61 12 7.1 51 | N N 1 N I-M I | Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ Phoenix, AZ |
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| EGAL NAME OF Nestern Bro | | | I GI EINI. | | | | | SYSTEM I 627 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------------|----------------------------------|
| | every radio s | tation ca | rried on a separate and discr nerally receivable by your cab | | | | | н |
| eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G | it is carried by monitoring, to prmation about m. lentify the call tate whether the the radio stati this by placing ive the station | / the sys be recei t the Co sign of e he statio on's sigr a check i's locatio | I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the pyright Office regulations on t each station carried. In is AM or FM. hal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the | t the system's he system's FM anto this point, see pa ed by the cable s the station is licen | eadend, and (2 enna, during c ige (v) of the g system as a se sed by the FC | ?) it can ertain st jeneral ii eparate : | be expected, ated intervals. nstructions in the. and discrete | Primary Transmitters Radio |
| CALL SIGN | AM or FM | S/D | LOCATION OF STATION | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | |
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| | od: 2019/2 LEGAL NAME OF OWNER OF | CABLE SVS | STEM: | | | | FOF | SYSTEM ID |
|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Name | Western Broadband L | | ·· _ IVI. | | | | | 6273 |
| | SUBSTITUTE CARRIAG | E: SPECI | AL STATEME | ENT AND PROGRAM LO |)G | | | |
| Substitute | In General: In space I, iden substitute basis during the a explanation of the programm | tify every no | nnetwork telev period, under sp | <i>ision program,</i> broadcast by pecific present and former F | y a <i>distant</i> sta CC rules, reg | ulations, or | authorizati | ons. For a further |
| Carriage: | 1. SPECIAL STATEMEN | | | | | | | |
| Special Statement and | During the accounting per | riod, did yo | ur cable syste | m carry, on a substitute ba | asis, any noni | network tele | evision pro | gr <u>am</u> |
| Program Log | broadcast by a distant sta | ation? | | | | | YES | × NO |
| | Note: If your answer is "No | o", leave the | e rest of this pa | age blank. If your answer i | s "Yes," you ı | must comp | ete the pro | ogram |
| | log in block 2. 2. LOG OF SUBSTITUT | | | | | | | |
| | period, was broadcast by a under certain FCC rules, ro Do not use general catego "NBA Basketball: 76ers vs Column 2: If the progra Column 3: Give the call Column 4: Give the bro the case of Mexican or Ca Column 5: Give the mo first. Example: for May 7 g Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m." Column 7: Enter the let to delete under FCC rules | ace, please e of every no a distant stat egulations, rires like "mo . Bulls." m was broat l sign of the adcast stati nadian stati nth and day ive "5/7." nes when th . Example: ter "R" if the and regulat | add additiona onnetwork tele tion and that y or authorizatio ovies" or "bask adcast live, ent station broadd ion's location (ons, if any, the y when your sy e substitute pr a program car e listed program ions in effect of | I rows to the tables. evision program ("substitute your cable system substitu- ns. See page (v) of the ge ketball." List specific progra- ter "Yes." Otherwise enter casting the substitute progra- the community to which the e community with which the ystem carried the substitute rogram was carried by you ried by a system from 6:00 m was substituted for prog | e program") ti ted for the pro- meral instruct am titles, for e "No." ram. le station is lid e station is lid e program. U r cable syste 1:15 p.m. to 6 ramming that | hat, during ogramming tions for fur example, "I censed by ' lentified). se numeral m. List the 3:28:30 p.m t your syste | the accour of another ther inform Love Lucy the FCC or s, with the times accu . should be | nting r station lation. " or r, in month lirately e guired |
| | | 0 | your system w | vas permitted to delete uno | | | ations in | |
| | effect on October 19, 1976 | S. | your system w | · | der FCC rules | | TUTE | 7. REASON F |
| | effect on October 19, 1976 | | | · | der FCC rules | N SUBSTI | TUTE | 7. REASON F |
| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |
| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |
| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |
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| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |
| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |
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| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |
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| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |
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| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | - |
| | effect on October 19, 1976 | UBSTITUT | E PROGRAM | / | WHE CARRI 5. MONTH | N SUBSTI | TUTE URRED IMES | 7. REASON F |

| Accounting Period: | 2019/2 | FORM SA | 1-2E. PAGE 6. |
|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | S | YSTEM ID# |
| Name | Western Broadband LLC | | 62738 |
| K Gross Receipts | GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. | ission service amount, see | 3,101.38 ss receipts) |
| | COPYRIGHT ROYALTY FEE | | |
| L Copyright Royalty Fee | Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. | 263,800 | |
| | BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS | | |
| | Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00 | this six-mon | |
| | Line 1. Royalty fee for accounting period | \$ | 52.00 |
| | Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 | | 0.00 |
| | Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2 | . \$ | 52.00 |
| | BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1 | 00) | |
| | 1. Base amount under statutory formula \$ 263,800.00 | | |
| | 2. Enter amount of gross receipts from space K | | |
| | 3. Subtract line 2 from line 1 | | |
| | 4. Enter the amount of gross receipts from space K | | |
| | 5. Enter the amount from line 3 | | |
| | 6. Subtract line 5 from line 4 | | |
| | 7. Multiply line 6 by .005 (enter figure here) | | |
| | 8. Interest charge. Enter the amount from line 4, space Q, page 8 | | 0.00 |
| | 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 | | |
| | BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527) | 600) | |
| | 1. Enter the amount of gross receipts from space K | | |
| | 2. Base amount under statutory formula | | |
| | 3. Subtract line 2 from line 1 | | |
| | 4. Multiply line 3 by .01 | | |
| | 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) | 1,319.00 | |
| | 6. Interest charge. Enter the amount from line 4, space Q, page 8 | 0.00 | |
| | 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 | | |
| | FILING FEE AND TOTAL REMITTANCE DUE | | |
| | | | |
| Filing Fee and Total Remittance | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) | 52.00 | |
| Due | 2. Filing Fee (See the instructions for more information on filing fee calculations) | 15.00 | |
| | 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 | \$ | 67.00 |
| | Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat | | nts! |

| Accounting Period: | 2019/2 | | | | | FORM SA1-2E. PAGE 7. |
|------------------------------------|-----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Name | LEGAL NAME OF C | DWNER OF CABLE SYSTEM: | | | | SYSTEM ID# 62738 |
| M Channels | to its subscribers 1. Enter the total system carried 2. Enter the total on which the ca | ou must give (1) the number s, and (2) the cable system's I number of channels on which television broadcast stations I number of activated channe able system carried television wast services | total number of the cable s | activated channels during t | | 5 |
| N Individual to Be Contacted | | BE CONTACTED IF FURT | | TION IS NEEDED (Identify | | |
| for Further Information | Name | Cara Baumeister | | | Telepho | ne (240) 420-3660 |
| | Address | 1000 Willow Circle (Number, street, rural route, apa Hagerstown, MD 2' (City, town, state, zip) | | ber) | | |
| | Email | cbaumeister@ | schurz.com | | Fax (optional) | |
| O Certification | I, the undersigned (Owned) (Agen in X (Offic in I have examined) | ed, hereby certify that (Check er other than corporation or t of owner other than corpo line 1 of space B and that the cer or partner) I am an officer line 1 of space B. d the statement of account an e, and correct to the best of m | one, <i>but only one</i> partnership) I at ration or partner owner is not a co · (if a corporation) d hereby declare | n, of the boxes.) m the owner of the cable sys r ship) I am the duly authoriz proration or partnership; or or a partner (if a partnershi under penalty of law that all | with Copyright Office regulations etem as identified in line 1 of space ed agent of the owner of the cab b) of the legal entity identified as statements of fact contained here a made in good faith. | ce B; or le system as identified owner of the cable system |
| | | | Enter an electr | John Schruz onic signature on the line abc e using an "/s/ signature" (e.g | | _ |
| | | Typed or printe Title: (Title of | President | hn Schruz & General Manager In corporation or partnership) | | |
| | | Date: | | | February 26, 2020 | |

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

| ccounting Period: 2019/2 | FORM SA1-2E. PAGE 8 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| EGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID |
| Vestern Broadband LLC | 62738 |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below. | - Special Statement Concerning Gross Receipts Exclusion |
| Name Mailing Address | |
| | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment | Q Interest Assessment |
| For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. | Interest Assessment |
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